PTO/SB/05 (05-03)

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(Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mail Label No. EX APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. [X] Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	7. 8. a. b.	ADDR Nucl (if a) Spec []	CD-ROM Comput leotide and/o pplicable, all Comput cification Sec CD-ROM paper Stateme PANYING Assignm 37 CFR (when the	Date Mailed: September 5, 2003 Commissioner for Patents Mail Stop Patent Application P.O. Box 1450 Alexandria, VA 22313-1450 M or CD-R in duplicate, large table or ter Program (Appendix) or Amino Acid Sequence Submission
(Only for new nonprovisional applications under 37 CFR 1.53(b)) APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. [X] Fee Transmittal Form (Submit an original, and a duplicate for fee processing) [X] Applicant claims small entity status See 37 CFR 1.27 [X] Specification (preferred arrangement set forth below - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Summary of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure [X] Drawing(s) (35 USC 113) [] Oath or Declaration (Total Sheets 7) (Total Pages) a. [] Newly executed (original or copy) b. [] Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. [] DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	7. 8. a. b. ACC 9. 10.	ADDF [] Nucl (if a) [] [] [] [] COMF	CD-ROM Comput leotide and/o pplicable, all Comput cification Sec CD-ROM paper Stateme PANYING Assignm 37 CFR (when the	Date Mailed: September 5, 2003 Commissioner for Patents Mail Stop Patent Application P.O. Box 1450 Alexandria, VA 22313-1450 M or CD-R in duplicate, large table or ter Program (Appendix) or Amino Acid Sequence Submission necessary) ter Readable Form (CRF) quence Listing on M or CD-R (2 copies); or ent verifying identity of above copies APPLICATION PARTS ment Papers (cover sheet & document(state) 3.73(b) Statement [] Power of there is an assignee)
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(for continuation/divisional with Box 18 completed) i. [] DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	13.	[X] Prelimin	nary Amendment
Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	14.	[X]		Receipt Postcard (MPEP 503) If be specifically itemized)
[] Application Data Sheet See 37 CFR 1.76	15.	[]		d Copy of Priority Document(s) gn priority is claimed)
ı	16.	[]		st and certification for non-publication 85 U.S.C. 122
	17.	[]	Other: _	
a CONTINUING APPLICATION, check appropriate box, and supply the requisite inf r in an Application Data Sheet under 37 CFR 1.76: □ Continuation			of prior appli Group Art U	ication No.: 09/851,327
b. Priority Applications In addition to any applications listed in 17a, the present application also cla incorporated herein by reference.	laims p	oriority	to the follow	ring application(s), each of which is here
60/206,143 Filed May 22, 2000				
CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior appliable, is considered a part of the disclosure of the accompanying continuation or division neorporation can only be relied upon when a portion has been inadvertently omitted CORRESPONDENCE ADI	onal ap	oplicati the sul	ion and is he	ereby incorporated by reference.

Tong Li Dann, Dorfman, Herrell and Skillman 1601 Market Street, Suite 2400 Philadelphia, Pennsylvania 19103

Tong Li Phone (215) 563-4100 Fax (215) 563-4044 P.T.O. Reg. No. 47,748



טי	Complete if known				
3	Complete if known				
	Application Number not yet assigned				
FEE TRANSMITTAL	Filing Date September 5, 2003				
	First Named Inventor LEVY, Robert J.				
	Group Art Unit Examiner Name				
TOT. AMT. OF PAYMENT: (1)+(2)+(3) = \$	Attorney Docket Number CHOP.0100.1				
METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)				
1. The Commissioner is hereby authorized to:	3. ADDITIONAL FEES				
□ Charge indicated fees	Fee Description Fee Paid				
Charge additional fees	Surcharge-late filing fee or oath				
🖫 Credit overpayments	Surcharge - late provisional filing fee or cover sheet				
to the account of DANN, DORFMAN, HERRELL AND SKILLMAN	Non-English specification				
Deposit Account Number 04-1406	For filing a request for reexamination				
2. Payment enclosed:	Requesting publication of SIR prior to Examiner action Requesting publication of SIR after Examiner action				
Checks in the amount of \$ 492.00	Extension for response within first month				
Check Nos.	Extension for response within second month				
	Extension for response within third month				
. FEE CALCULATION	Extension for response within fourth month				
1. FILING FEE	Notice of Appeal				
Fee Description Fee Paid	Filing a brief in support of an appeal Request for oral hearing				
Utility filing fee 375.00	Petition to institute a public use proceeding				
Design filing fee	Petition to revive unavoidably abandoned application				
Plant filing fee	Petition to revive unintentionally abandoned application				
Reissue filing fee	Petitions to the Commissioner				
Provisional filing fee	Petitions related to provisional applications				
SUBTOTAL (1) \$ 375.00	Submission of Information Disclosure Stmt.				
· · · · · · · · · · · · · · · · · · ·	Recording each patent assignment per property (times number of properties)				
	Filing a submission after final rejection (37 CFR 1.129(a))				
2. CLAIMS	For each additional invention to be examined (37 CFR 1.129(b))				
Extra Fee Fee Paid	Other fee (specify) Advance Order (10 copies)				
Total Claims Presented 33 - 20 = 13 x 9.00 = 117.00	Other fee (specify)				
(a)					
Independent Claims					
Presented $3 - 3 = 0 \times 42.00 = 0$					
Multiple Dependent Claim					
(first presentation) = 0					
(a) Enter 20 or number previously paid for (b) Enter 3 or number previously paid for					
SUBTOTAL (2) \$ 117.00	SUBTOTAL (3) \$				
Submitted By: Typed or					

Submi	tted	By:
- Tara		

Printed Name Tong Li

Signature _____

Reg. Number 47,748

Date_September 5, 2003

Deposit Account User ID
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